

SICC MEETING MINUTES

Truman Building, Room 400

November 18, 2005

Members Present

Leslie Elpers
Valeri Lane
Melinda Sanders
Gretchen Schmitz

Sue Allen
Lisa Robbins
Melodie Friedebach
Julie Kauffman

Kathy Fuger
Sharon Hailey
Sheryl Taylor

Members Not Present

Elizabeth Spaugh
Margaret Franklin

Joan Harter
Darin Preis

Ronald Roberts

DESE Staff Present

Bill Connelly
Margaret Strecker
Dale Carlson

Joyce Jackman
Kate Numerick
Mary Corey

Sarah Parker
Debby Parsons

To review copies of handouts mentioned in the minutes below, go to the following website:
<http://dese.mo.gov/divspeced/FirstSteps/SICCMtgdates.htm> and click on "Handouts" for the meeting you are interested in.

Call to Order, Welcome, and Introductions

Valerie Lane called the meeting to order at 8:37 a.m.

Approval of SICC Minutes - Leslie Elpers made a motion to approve the minutes as written. Lisa Robbins seconded the motion. Motion passed.

Review SPP/Regional Meetings Outcomes - Mary Corey indicated that the SICC is charged with providing an annual report to the Governor. The deadline for the State Performance Plan (SPP) is December 2. Kate Numerick and Mary discussed the draft SPP with the SICC and asked for their input. DESE will finalize their response. Once DESE sends the report to OSEP, it will be sent to SICC members and posted on the web. The SICC will vote on the SPP submitted to OSEP on December 2 at the January meeting to determine if they want to use it as their annual report.

Indicator 1 – Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner. It was decided to determine if all services on the IFSP are provided in a timely manner by verifying that their start date is within 30 days of authorization. This is a compliance requirement so the target has to be 100 percent. The Improvement Activities include ensuring that data is accurate and conducting regular data reviews. Targeted technical assistance will be provided to SPOEs not meeting the target. Primary coach or transdisciplinary model could be an option for the more rural SPOEs for some services but probably not help for specialized services such as, audiology and nutrition.

Indicator 2 – Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children. – The data showed that 96.9% were served in those two settings. The target is already set high but DESE has to show improvement in their targets so DESE is recommending increasing the target percentage just a bit. First Steps consultants will review locations that have a high level of services being provided at special purpose centers instead of in natural environments. Kathy recommended that the wording be clarified on the IFSP form as to what primary means and that the target should be set at 75% or something higher than 50%. OSEP has instructed states, that targets cannot be set lower than the current baseline. The state will also include information regarding service location in addition to the primary setting data.

Indicator 3 – Percent of infants and toddlers with IFSPs who demonstrate improved: a) positive social-emotional skills (including social relationships); b) acquisition and use of knowledge and skills (including early language/communication); and c) use of appropriate behaviors to meet their needs. This indicator is new. DESE does not have to provide data but must provide a plan for collecting data. DESE will conduct a pilot and hopes to receive information that will be useful at the local level and not be overly burdensome. The pilot will use three types of processes. The first process will use existing data to determine a child's functional level for each of the three outcomes. The second process will identify specific assessments to determine every child's functional level. The third process will develop a new assessment to determine child outcomes. The pilot will run from now until April 15, 2006. Functional age at entry will be collected from the pilot sites for all new children in the three required outcome areas.

Indicator 4 – Percent of families participating in Part C who report that early intervention services have helped the family: a) know their rights; b) effectively communicate their children's needs; and c) help their children develop and learn. This indicator is new. DESE must provide a plan on how they are going to collect this data. DESE has sent out family surveys for the last couple of years and the information collected will be included in the SPP. However, there is no demographic information included on current surveys. DESE would like to wait and set targets after looking at the survey results and assuring that it is a representative sample of families in the program. It was suggested that the exit survey or some other strategies be used to get a larger response from parents, such as possibly conducting random phone surveys. Another suggestion was to use the complaint and monitoring systems. It was suggested that DESE revise the current survey to include demographic information.

Indicator 5 - Percent of infants and toddlers birth to one with IFSPs compared to: a) other states with similar eligibility definitions; and b) national data. Sharon suggested collaborating with Early Head Start and Head Start to make sure we are reaching these referral sources. It was suggested that the wording be changed to say "meet the eligibility criteria but do not actually enter into the program."

Indicator 6 – Percent of infants and toddlers birth to three with IFSPs compared to: a) other states with similar eligibility definitions; and b) national data. OSEP breaks the states into groups with similar eligibility criteria for comparative data. The targets show an increase.

Indicator 7 – Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. It was suggested that DESE collect more detailed information for the "No Reasons" option.

Indicator 8 – Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: a) IFSPs with transition steps and services; b) notification to LEA, if child potentially eligible for Part B; and c) transition conference, if child potentially eligible for Part B. This is not a new indicator but DESE has never had to report on this data in the detail now required. DESE looked at monitorings for 04-05 and looked at the children's files that were reviewed to see if the three compliance indicators were met. There were not a large number of files that were reviewed. DESE will explain to OSEP that this is how data

was collected but that DESE does not intend to continue doing it that way. DESE will be able to pull data, in the future, from the new web system.

Indicator 9 – General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification. Target must be 100%.

Indicator 10 - Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular compliant. No discussion.

Indicator 11 – Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline. No discussion.

Indicator 12 – Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted). This indicator does not apply to Missouri since the state did not adopt the Part B procedures for First Steps.

Indicator 13 – Percent of mediations held that resulted in mediation agreements.

Since there are fewer than 10 First Step mediations in a year, DESE did not have to establish targets for the indicator.

Indicator 14 – State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate. DESE is continually enhancing data verifications.

Debby Parsons indicated that once DESE submits the SPP, OSEP has 120 days to approve or disapprove. OSEP may request additional information or corrections to be made. OSEP may not think DESE's targets are rigorous enough or suggest that additional targets be included.

Kathy Fuger suggested that DESE may need to address with the RICCs a child find plan to include a breakdown of geographic/racial differences (e.g. Spanish speaking, etc.), transient populations, homeless, and other categories/risk factors. Debby Parsons stated this will be included under the new RICC reports.

Budget/Finance – Dale Carlson indicated that figures are still running about the same. There still is an issue with the First Steps fund. DESE can not spend out of this fund due to the Legislature naming it incorrectly in the appropriation process. This issue will be corrected as part of the Division supplemental appropriation request. A question was raised that since expenditures are going down, does this mean that child count and services are being decreased. Dale responded there could be a number of reasons for the change, but we don't have specific data at this time.

Family Cost Participation (FCP) – Dale Carlson indicated that the Service Coordinators and SPOEs were recently sent a couple documents that will be mailed to families on November 30 with the facts on FCP. DESE has been working with the CFO and the first monthly billing will occur in the first quarter of 2006, when the new SPOEs come on-line. A head of household designation will be made for each family and the billing will go to that designated person within the family. Specific training dates have not been set up but will be in the near future. DESE and the CFO have worked with the Department of Insurance to work out issues concerning implementation of SB500 and insurance mandate. A payment declaration letter was sent to insurance carriers in October and there are approximately 200 insurance carriers involved. Some insurance carriers are excluded from state insurance mandates. The insurance carriers can choose annually how they wish to reimburse First Steps. Some carrier options are direct billing, ½ of one percent of direct written premiums, or \$500,000.

Update on the RFP timeframe – Joyce Jackman indicated that the SPOE RFP is in the final stages and she believes implementation will be around Feb 1. SPOE awards will be announced by the Office of

Administration (OA). Once awards have been announced, the SPOE will have a minimum of 45 days to get up and running (hire staff, get office space, etc.). OA will provide official notification of the end date of current SPOE contracts. Once announced, it will be public information.

First Steps Training Report – Kate Numerick handed out information that discussed the advantages of Web based training vs. face-to-face training. The costs for DESE have been reduced from an average of \$350 to \$4 per participant. Module training - the First Steps consultants take this material and provide technical assistance as needed. CEUs are given for the online trainings as needed. Valeri suggested that the SICC discuss in one year about doing an outside independent evaluation of the First Steps training system.

NECTAC & the Early Childhood Outcomes (ECO) Work – There are some really good things going on nationally with Child and Family Outcomes. The origin of the ECO came from APR when states were asked to report how well the Part C and EC programs were doing. OSEP found that most states were not looking at functional levels of children when they came in and when they exited services. OSEP funded the national EC Outcome Center. ECO wanted to determine what were appropriate outcomes and came up with three EC functional outcomes that relate to positive social/emotional skills (including social relationships), use of appropriate behaviors to meet their needs, and acquisition and use of knowledge and skills (including early language/communication and early literacy). They also recognized that there are five family outcomes, however only two are specifically appropriate for 619 and Part C programs. They are: 1) families understand their children's strengths, abilities, and special needs and 2) families know their rights and advocate effectively for their children. ECO is cross walking various assessment tools to the three different functional outcomes. Test developers recognize that all states are having difficulty reporting on these same things.

LICC Reports – The Special Education First Steps Regional Consultants are developing a manual and will go out and work with each group. The consultants did host regional LICC meetings but they were very poorly attended.

- Jefferson County LICC still meets regularly.
- Franklin County LICC also meets regularly. They have presentations each month and are developing a resource book.
- The St. Joseph LICC is having an identity crisis because they are not sure how the RICC fits in. There are some local issues that the LICC wants to meet again soon to discuss.
- The LICC in St. Charles is very organized and works well with the RICC. They are coming up with a lot of good ideas and just set their goals for next year.
- The RICC from the Greater St. Louis area is well organized. They are headed up by family members and have a child find committee, as well as a provider recruitment program.

New Appointments Status - Melodie indicated that the Governor's office has not made any new appointments for the SICC yet. DESE has submitted all the names to the Governor's Office.

WebSPOE Issues - Bill Connelly indicated that a group of SPOE directors met with DESE and Covansys staff and developed a list of concerns for the WebSPOE. All concerns and opinions were heard. Everything is associated with a cost; therefore DESE and Covansys have to prioritize those concerns. One of the major concerns was about the conversion of children. The CFO works on a specific number of issues at a time and then "rolls them out". The October rollout just went out and dealt with the reports. Every two or three months a certain number of issues are rolled out and the system is taken offline to fix those issues. The 25 most critical issues are being identified. The family cost participation and the insurance issues have now been added to the critical list. DESE will provide WebSPOE training for new contractors with dates and locations to be determined at a later date.

MO State Government Review Commission Preliminary Proposal (Task Force C) – The discussion opened regarding a recommendation from a taskforce to move First Steps from the Department of Elementary and Secondary Education (DESE) to the Department of Health and Senior Service (DHSS). Sue Allen

indicated that she first heard about this at the St. Charles RICC. Sue then met with Sharon Rohrbach (Nurses for Newborns) and Peter Kinder and asked the following questions: Would Department of Health and Senior Services (DHSS) even want this? Sharon said DHSS upper management had indicated that yes they would be interested. Sue then asked why and the response given was Child Find and because DESE had done such a poor job of Child Find. Sharon stated that the significant health care concerns may be better addressed by DHSS. Sue then asked about the children without a medical diagnosis that have more developmental issues and the response given was that DHSS could not do any worse than DESE. Sue then questioned that if DHSS had this information available all along why had they not, in the spirit of collaboration, provided the information to DESE and the response was why had DESE not asked for the information. Melinda Sanders was confused by this and indicated that if the Governor moved First Step to DHSS, they would accept it; however it was her opinion that this was an educational issue and not a health issue. No one from DESE or DHSS was on the taskforce. Valeri suggested that a letter be drafted to the Governor, on the behalf of the SICC, in response to the recommendation with a copy to the taskforce, and a blind copy to Mary Beth Luna, stating that a significant number of children do not have significant medical issues but have more developmental problems. Sharon Hailey made a motion to draft and send a letter to the Governor, with the above recommendations. Susan Allen seconded. Motion passed. Melinda Sanders (DHSS) and Melodie Friedebach (DESE) abstained from the vote.

Travel Reimbursement (Proposed in the SPOE/RFP) – The SPOE RFP allows for travel reimbursement when providers travel 60 miles one way. Leslie asked how that number was derived and no specific reason could be given. There are concerns about the cost of rising gas prices and providers turning jobs down because of the distance they must travel without reimbursement. Another concern is that although there might be an incentive, it still will not address the issue of provider availability, especially in rural areas. Leslie stated that becoming a provider is becoming less appealing and maybe there are other incentives that can be offered to providers to sign up. Melodie said that she understands these concerns, however, this is a fiscal decision. Valeri stated that in the RFP it states the reimbursement must be made by the CFO. Joyce indicated that a SPOE can employ or contract with a service provider. The RFP states that the travel reimbursement will be reimbursed by the CFO. It was recommended that data be collected to see what impact the travel reimbursement will have. Medicaid will not allow First Steps to bill for mileage. They pay a flat rate for direct services provided.

Agenda Items for Next Meeting:

Family cost participation update/discussion - Dale Carlson
Review final report for SPP
RICC/LICC Success Stories
Budget
WebSPOE
Transition of Phase II SPOEs

Special Presentations

Update on the Sunshine Law – Heidi Atkins Lieberman
National Perspective Child Outcomes-what other states and ECO are doing (also update on state pilot) – Kate Numerick
Presentation of Primary Coach Model

New Business

Gretchen Schmitz is retiring from the Department of Insurance.

In Southwest Missouri, the state closed eight (8) child care centers called First Step (not First Steps). They lost their DSS child subsidy funding. Some people were confusing this with the First Steps program.

Lisa Robbins made a motion to adjourn the meeting. Susan Allen seconded. Motion passed.
Meeting adjourned at 3:00 p.m.